

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.L.P.E. CLASSIFIER		48	2/5/01
FORMALITY REVIEW	MN	5C4/920	02-21-01
RESPONSE FORMALITY REVIEW	request	925	03-21-01
		905	6/11/01

INDEX OF CLAIMS

= Rejected N Non-elected
 = Allowed I Interference
 = (Through numeral) Canceled A Appeal
 = Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
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44	✓	✓	✓
45	✓	✓	✓
46	✓	✓	✓
47	✓	✓	✓
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions
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